UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549

FORM D

200NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
NIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076

Expires: April 30, 2008

Expires: April 30, 2008
Estimated average burden
hours per form 16.00

S	SEC USE ONLY					
Prefix Serial						
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DA	TE REC	EIVED				

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)							
STONEMARK CAPITAL PARTNERS,	LP-LIMITED PA	<u> ARTNERSHIP</u>	INTERESTS_				
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505		Section 4(6)	ULOE		
Type of Filing:	New Filing	☐ Amendme	nt		III ARMI (SANI AIMI ETALY AIMI ATTI ITA		
	A. BAS	SIC IDENTIFI	CATION DATA				
1. Enter the information requested abo	ut the issuer						
Name of Issuer (check if this is an amen	dment and name h	as changed, and	indicate change.)	0	7075764		
STONEMARK CAPITAL PARTNERS,	LP						
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)							
P.O. Box 296, Bedford Hills, New York 10507-0296 (914) 241-0043							
				<u> </u>			
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)							
<u>`</u>	(if different from Executive Offices)						
Brief Description of Business PROCESSED							
Trading and Investing in Securities							
Type of Business Organization				<i>"\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	CT 0 2 2007		
☐ corporation ☐ limited p	artnership, already	y formed	other (please	specify):			
☐ business trust ☐ limited p	artnership, to be fo	ormed		1	HOMSON		
		Month	Year		INANCIAL		
Actual or Estimated Date of Incorporation	or Organization				Estimated		
•	Actual or Estimated Date of Incorporation or Organization 0 4 0 7 🖾 Actual 🗀 Estimated						
Jurisdiction of Incorporation or Organization	on: (Enter two-lett				D E		
		CN for Canada; FN for foreign jurisdiction)					

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CRF 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Avenue, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this from. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

BASIC IDENTIFICATION DATA A.

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General Partner			
Full Name (Last name first, if individual) Springhurst Capital Management, LLC								
Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 296, Bedford Hills, New York 10507-0296								
			DF : 000		5 V · V I			
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director				
Full Name (Last name first, Markatos, Louis G.	,							
Business or Residence Addr P.O. Box 296, Bedford Hill	•		o Code)					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner			
Full Name (Last name first,	if individual)				-			
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)	<u>-</u>				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or			
					Managing Partner			
Full Name (Last name first,	if individual)							
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	o Code)					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first,	if individual)							
Business or Residence Addr	ess (Number an	d Street City State Zir	2 Code)		 			
Dustiness of Residence Fide.	ess (I valloer an	a succi, ony, state, zip	, code,					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first,	if individual)							
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	o Code)					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner			
Full Name (Last name first,	if individual)							
Rusiness or Residence Addr	ecc (Number an	d Street City State 7in	2 Code)					

				I	3. I	NFORM	IATION	ABOUT	OFFER	ING				
I. H	las the issu	er sold, or	does the	issuer inte	end to sell	, to non-ac	credited i	nvestors ir	this offer	ing?			Yes	No
				Ar	nswer also	in Appen	dix, Colur	nn 2, if fili	ing under l	JLOE.				⊠
2. V	hat is the				=	-	-						\$500,000)
2 5		-					_	lesser am						.,
	oes the off		•	•	-								Yes	No ⊠
c: If o	inter the in commission a person to r states, list roker or de	or similar be listed the name	r remuner I is an ass of the bro	ation for : ociated po oker or de	solicitation erson or ag ealer. If m	n of purch gent of a b ore than f	asers in co proker or co ive (5) per	onnection lealer regis rsons to be	with sales stered with	of securiti	ies in the o and/or with	ffering. a state		
Full N	ame (Last i	name first	, if individ	dual)	. ,	***								
Busine	ess or Resid	lence Add	lress (Nun	nber and !	Street, Cit	y, State, Z	ip Code							
Name	of Associa	ed Broke	r or Deale	r					•	····				
State i	n Which Pe	rson List	ed Has So	licited or	Intends to	Solicit P	urchasers							
(6	Check "All	States" or	r check in	dividual S	States)				••••••	***************************************		•••	□ All	States
☐ AL ☐ IL ☐ MT ☐ RI	☐ IN	☐ AZ ☐ IA ☐ NV ☐ SD	☐ AR ☐ KS ☐ NH ☐ TN	☐ CA ☐ KY ☐ NJ ☐ TX	CO LA NM UT	CT ME NY VT	☐ DE ☐ MD ☐ NC ☐ VA	DC MA ND WA	□ FL □ MI □ OH □ WV	☐ GA ☐ MN ☐ OK ☐ WI	☐ HI ☐ MS ☐ OR ☐ WY	☐ ID ☐ MO ☐ PA ☐ PR		
Full N	ame (Last i	name first	, if individ	iual)										,
Busine	ess or Resid	lence Add	lress (Nun	nber and	Street, Cit	y, State, Z	ip Code							
Name	of Associa	ed Broke	r or Deale	er										
State i	n Which Pe	erson Liste	ed Has So	licited or	Intends to	Solicit Po	urchasers							
((Check "All	States" or	r check in	dividual S	States)	************		•••••	***************			•••	□ All	States
□ AL □ IL □ MT □ RI	☐ IN	☐ AZ ☐ IA ☐ NV ☐ SD	☐ AR ☐ KS ☐ NH ☐ TN	□ CA □ KY □ NJ □ TX	CO LA NM UT	CT ME NY VT	☐ DE ☐ MD ☐ NC ☐ VA	DC MA ND WA	□ FL □ MI □ OH □ WV	☐ GA ☐ MN ☐ OK ☐ WI	☐ HI ☐ MS ☐ OR ☐ WY	□ ID □ MO □ PA □ PR		
Full N	ame (Last i	name first	, if individ	iual)										
Busine	ess or Resid	lence Add	lress (Nun	nber and :	Street, Cit	y, State, Z	ip Code							
Name	of Associa	ed Broke	r or Deale	r										
State i	n Which Pe	rson Liste	ed Has So	licited or	Intends to	Solicit Pr	urchasers			·························				
((Check "All	States" or	r check in	dividual S	States)								□ All	States
□ AL □ IL □ MT □ RI	☐ AK ☐ IN ☐ NE ☐ SC	☐ AZ ☐ IA ☐ NV ☐ SD	☐ AR ☐ KS ☐ NH ☐ TN	□ CA □ KY □ NJ □ TX	CO LA NM UT	CT ME NY VT	☐ DE ☐ MD ☐ NC ☐ VA	☐ DC ☐ MA ☐ ND ☐ WA	□ FL □ MI □ OH □ WV	□ GA □ MN □ OK □ WI	□ HI □ MS □ OR □ WY	☐ ID ☐ MO ☐ PA ☐ PR		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C: OFFERING PRICE, NUMBER OR INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the

	transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$	0	\$	0
	Equity	\$	0	s	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$	0	\$	0
	Partnership Interests	\$	*	\$	500,000
	Other (specify): Limited Liability Company Interests	\$	0	\$	0
	Total Answer also in Appendix, Column 3, if filing Under ULOE	\$	*	\$	500,000
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings Under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		2	s	500,000
	Non-accredited Investors		0	\$	0
	Total (for filings Under Rule 504 only)		2	\$	500,000
3.	If this filing is for an offering Under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505			\$	
	Regulation A			\$	
	Rule 504			\$	
	Total			\$	

*No minimum or maximum amount

C. OFFERING PRICE, NUMBER OR INVESTORS, EXPENSES AND USE OF PROCEEDS

4.	a.	Furnish a statement of all expenses in connection with the this offering. Exclude amounts relating solely to organiza may be given as subject to future contingencies. If the an estimate and check the box to the left of the estimate.	ition exp	penses of the issuer. The information	nation	
		Transfer Agent's Fees		\$		
		Printing and Engraving Costs	\boxtimes	\$_1,000		
		Legal Fees	\boxtimes	\$_20,000		
		Accounting Fees		\boxtimes	\$_2,000	
		Engineering Fees		\$		
		Sales Commissions (Specify finder's fees separately)				\$
		Other Expenses (identify) delivery, mailing, fax, telephone, t	ransport	tation	\boxtimes	\$_2,000
		Total	*************		\boxtimes	\$_25,000
	b.	Enter the difference between the aggregate offering price in response to Part C – Question 1 and total expenses fur in response to Part C – Question 4.a. This difference "adjusted gross proceeds to the issuer."	mished is the			\$*
5.	amo box equ	cate below the amount of the adjusted gross proceeds to the d or proposed to be used for each of the purposes shown, bunt for any purpose is not known, furnish an estimate and che to the left of the estimate. The total of the payments listed all the adjusted gross proceeds to the issuer set forth in response C – Question 4.b above.	If the eck the d must	Payments to Officers, Directors, &Affiliates		Payments to Others
	S	alaries and Fees		\$		\$
	P	urchase of real estate		\$		\$
		urchase, rental or leasing and installation of machinery and		•	_	•
	ec	quipment		\$		\$
	C	onstruction or leasing of plant buildings and facilities		\$		\$
	se ex	equisition of other businesses (including the value of recurities involved in this offering that may be used in schange for the assets or securities of another issuer pursuant	-	¢		¢
	to	a merger)		\$		\$
	R	epayment of indebtedness		\$		\$
	W	orking capital		\$ All adjusted gross proceeds		\$
	0	ther		\$		\$
				\$		\$
	C	olumn Totals		\$_All adjusted gross proceeds		\$
	T	otal Payments Listed (column totals added)		\$_All adjusted gross proceeds		\$

*No minimum or maximum amount

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) STONEMARK CAPITAL PARTNERS, LP	Signature Springhurst Capital Management, LLC as General Partner	Date
	By: Louis St. Markatos	Aug. 10, 2007
Name of Signer (Print or Type) Louis G. Markatos	Title (Print or Type) Managing Member of the General Partner	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001)

